

## Reimbursement for SBIRT (April 2014)

Payer	Code	Description	Billing Provider	Fee Schedule	Additional Information
Medicaid (Direct bill to NC Division of Medical Assistance)	CPT 99408	Alcohol and/or substance (other than tobacco) abuse structured screening and brief intervention services; 15 to 30 minutes	Physician (MD, DO, and Psychiatrist); Nurse Practitioner (NP); Physician Assistant (PA); Certified Coding Associate (CCAS); Certified Coding Specialist (CCS); Certified Nurse Practitioner (CNP); Critical Care Clinical Nurse Specialist (CCNS); and Health Department.  <u>Behavioral Health Provider (BHP):</u> Psychologist (PsyD/PhD); Licensed Psychological Associate (LPA); Licensed Clinical Social Worker /Licensed Clinical Social Worker Associate (LCSW/LCSWA); Licensed Clinical Addiction Specialist/Licensed Clinical Addiction Specialist Associate (LCAS/LCASA); Licensed Professional Counselor/Licensed Professional Counselor Associate (LPC/LPCA); Licensed Marriage and Family Therapist/Licensed Marriage and Family Associate (LMFT/LMFTA)	\$29.81	Documentation should always support services rendered.  <b>Associate-Level Behavioral Health Providers (A-BHPs)</b> The National Correct Coding Initiative (NCCI) is a CMS program designed to prevent improper payment of procedures that should not be submitted together. A-BHPs must append NCCI Modifier 59 and Modifier SC to CPT 99408/99409. Modifier 59 is used to identify procedures/services that are not normally reported together, but are appropriate under the circumstances. Modifier SC is used to identify a "medically necessary service". The use of these modifiers together allows the system to recognize that the service was provided by a <i>different attending provider</i> .  <b>Licensed Behavioral Health Providers (LBHPs)</b> LBHPs must bill incident-to the physician in an outpatient office setting using physician National Provider Identifier (NPI). The physician NPI is a unique 10-digit identification number issued by the Centers for Medicare and Medicaid Services (CMS). The NPI is also used by commercial healthcare insurers.
	CPT 99409	Alcohol and/or substance (other than tobacco) abuse structured screening and brief intervention services; greater than 30 minutes	Physician, NP, PA, CCAS, CCS, CNP, CCNS, and Health Department.  <u>Behavioral Health Provider (BHP):</u> PsyD/PhD, LPA, LCSW/LCSWA, LCAS/LCASA, LPC/LPCA, LMFT/LMFTA	\$58.60	<b>Physicians</b> Evaluation and Management (E/M) codes is a medical billing process that physicians must use to be reimbursed by Medicare, Medicaid programs, or private insurance for patient encounters. CPT 99408/99409 may be reported in addition to E/M codes using Modifier 25. Appending Modifier 25 to the E/M code indicates to the carriers or fiscal intermediaries that <i>as a result of the patient's condition, the physician performed a significant, separately identifiable E/M service above and beyond the other service provided</i> .  <b>Rural Health Clinics (RHCs) and Federally-Qualified Health Centers (FQHCs)</b> CPT 99408/99409 are designated as a part of RHC and FQHC core services and cannot be billed separately. Instead, RHC and FQHC should report T1015 (clinic visit/encounter, all-inclusive) with Modifier HI (integrated mental health program).
Medicare	G0396	Alcohol and/or substance (other than tobacco) abuse structured assessment (e.g., AUDIT, DAST), and brief intervention ;15 to 30 minutes	Physician (MD, DO and Psychiatrist); PA; NP; Licensed Clinical Social Worker (LCSW); Clinical Nurse Specialist (CNS); Clinical Psychologist (CP); Certified Nurse-Midwife (CNM); Independently Practicing Psychologist (IPP)	\$38.95	Documentation should always support services rendered.  G0396 and G0397 must be <i>medically reasonable and necessary</i> to the overall diagnosis or treatment of the patient's condition.  G0396 and G0397 can be furnished on the same day, to the same patient, by the same provider or a different provider. This is regardless of whether the providers are in the same or different locations.
	G0397	Alcohol and/or substance (other than tobacco) abuse structured screening and brief intervention services; greater than 30 minutes	Physician (MD, DO, Psychiatrist); PA; NP; LCSW; CNS; CP; CNM; IPP	\$72.44	
	G0442	Annual alcohol misuse screening, 15 minutes  <i>*Can only be reported as a routine screening once per 12 month period.</i>	Physician, PA, NP, CNS, CNM  <i>*Billing Provider must work in General Practice, Family Medicine, Internal Medicine, Obstetrics/Gynecology, Pediatric Medicine, or Geriatric Medicine.</i>	\$18.61	Documentation should always support services rendered.  G0442 and G0443 must be <i>medically reasonable and necessary</i> to the overall diagnosis or treatment of the patient's condition.  G0442 and G0443 can be furnished on the same day, to the same patient, by the same provider or a different provider. This is regardless of whether the providers are in the same or different locations.
	G0443	Brief face-to-face behavioral counseling for alcohol misuse; 15 minutes  <i>*Can be reported as a brief intervention up to 4 times per 12 month period.</i>	Physician, PA, NP, CNS, CNM  <i>*Billing Provider must work in General Practice, Family Medicine, Internal Medicine, Obstetrics/Gynecology, Pediatric Medicine, or Geriatric Medicine.</i>	\$25.34	

# Incident-To Guidelines for Behavioral Health Providers (BHP)

- Medicaid
  - Physician has initially seen patient
  - Physician must be able to provide evidence of management of the patient's care
  - Physician employs the BHP or BHP is employed by the same entity as the physician
  - *Physician must be readily accessible by phone or pager and able to return to the office*
- Medicare and Dually Eligible Medicare/Medicaid Recipients
  - Physician has initially seen patient
  - Physician must be able to provide evidence of management of the patient's care
  - Physician employs the BHP or BHP is employed by the same entity as the physician
  - *Physician must be in the office suite where the service is being provided and immediately accessible*

# Depression /Developmental /Evidence Based Screening

Administration and interpretation of health risk assessment instrument (eg, health hazard appraisal) **99420**

Annual depression screening **G0444** 15 minutes

Payer	Codes	Reimbursement	Eligible Site of Service	Eligible Provider	Special Provisions
Medicaid	99420	\$8.14	Physician Office Outpatient Hospital	MD, CNP, CP, LPA, LCSW, LPC, LMFT, CNS, CCAS, CCS	<ol style="list-style-type: none"> <li>1. Services <i>must be billed incident-to the physician</i> (using physician NPI) in the office setting.</li> <li>*2. May be reported in addition to E/M or Health Check.</li> <li>3. May be used for mental health, MCHAT and other secondary developmental screens.</li> <li>5. Limited to 2 units/day.</li> </ol>
Medicare	G0444	\$16.46	Office Outpatient Hospital	Primary Care providers in primary care settings	<ol style="list-style-type: none"> <li>1. Covered once in 12-month period.</li> <li>*2. Limited to depression screening only and does not include treatment</li> <li>3. Claims for services may be submitted but payment may be held until April 2, 2012.</li> <li>5. Updated information may be released by carriers.</li> </ol>

\* Modifier 25 must be appended to E/M service. Documentation should support both services.

## Incident-To Guidelines For Behavioral Health Providers-Medicaid

- Physician has initially seen patient
- Physician must be able to provide evidence of management of the patient's care
- Physician employees the BHP or BHP employed by same entity as physician
- Physician *must be readily accessible by phone or pager* and able to return to office

## Incident-To Guidelines – Medicare and Dually Eligible Medicare/Medicaid Recipients

- Physician has initially seen patient
- Physician must be able to provide evidence of management of the patient's care
- Physician employees the BHP or BHP employed by same entity as physician
- Physician *must be in the office suite* where the service is being provided and immediately accessible

# Health and Behavioral Assessment/Intervention Obesity Counseling

Health and behavior assessment (eg, health-focused clinical interview, behavioral observations, psychophysiological monitoring, health-oriented questionnaires), each 15 minutes face-to-face with the patient	96150	Initial assessment
	96151	Reassessment

Health and behavior intervention, each 15 minutes, face-to-face	96152	Individual
---	-------	------------

Face-to-face behavioral counseling for obesity	G0447	15 minutes
--	-------	------------

Payer	Codes	Reimbursement	Eligible Site of Service	Eligible Provider	Special Provisions
Medicaid	96150	\$19.25	Physician Office Outpatient	MD, CNP, CP, LPA, LCSW, LPC, LMFT, CNS, CCAS, CCS	<ol style="list-style-type: none"> <li>1. Services <i>must be billed incident-to the physician</i> (using physician NPI) in the office setting.</li> <li>2. BHP cannot report therapy codes on same day.</li> <li>3. Must provide <i>medical</i> and not behavioral ICD code.</li> <li>5. Follows Medicare coverage policy (limited to 1 hour).</li> </ol>
	96151	\$18.63	Hospital		
Medicare	96150	\$20.10	Physician Office	Clinical Psychologists only	
	96151	\$19.41			
	96152	\$18.42			
New Medicare Benefit	G0447	\$24.34	Physician Office	Primary Care Providers	<ol style="list-style-type: none"> <li>1. Must have BMI <math>\geq</math> 30</li> <li>2. Schedule of visits and other requirements found at <a href="https://www.cms.gov/MLN/MattersArticles/downloads/MM7641.pdf">https://www.cms.gov/MLN/MattersArticles/downloads/MM7641.pdf</a></li> </ol>

*Should have included 96152*

### Incident-To Guidelines For Behavioral Health Providers-Medicaid

- Physician has initially seen patient
- Physician must be able to provide evidence of management of the patient's care
- Physician employees the BHP or BHP employed by same entity as physician
- Physician *must be readily accessible by phone or pager* and able to return to office

# Smoking Cessation Prevention and Counseling

Smoking and tobacco use cessation counseling visit; intermediate	<b>99406</b>	>3 minutes up to 10 minutes
Smoking and tobacco use cessation counseling visit; intensive	<b>99407</b>	>10 minutes

Smoking and tobacco cessation counseling visit for the asymptomatic patient; intermediate	<b>G0436</b>	>3 minutes up to 10 minutes
Smoking and tobacco cessation counseling visit for the asymptomatic patient; intensive	<b>G0437</b>	>10 minutes

Payer	Codes	Reimbursement	Eligible Site of Service	Eligible Provider	Special Provisions
Medicaid	99406	\$11.93	Physician Office Outpatient	MD, CNP, CP, LPA, LCSW, LPC, LMFT, CNS, CCAS, CCS	<ol style="list-style-type: none"> <li>1. Services <i>must be billed incident-to the physician</i> (using physician NPI) in the office setting.</li> <li>*2. May be reported in addition to E/M or Health Check.</li> <li>3. Follows Medicare coverage guidelines.</li> <li>4. Core services for RHC and FQHC.</li> </ol>
	99407	\$23.05	Hospital		
Medicare	99406	\$13.14	Physician Office Outpatient	Physicians, CP, LCSW, NP, CNS, PA	
	99407	\$25.62	Hospital		
	G0436	\$13.14	Outpatient and Inpatient	Physicians, "Medicare recognized practitioners"	
	G0437	\$27.19			

# Smoking Cessation Prevention and Counseling

\* Modifier 25 must be appended to E/M service. Documentation should support both services.

## **Incident-To Guidelines For Behavioral Health Providers-Medicaid**

- Physician has initially seen patient
- Physician must be able to provide evidence of management of the patient's care
- Physician employees the BHP or BHP employed by same entity as physician
- Physician *must be readily accessible by phone or pager* and able to return to office

## **Incident-To Guidelines – Medicare and Dually Eligible Medicare/Medicaid Recipients**

- Physician has initially seen patient
- Physician must be able to provide evidence of management of the patient's care
- Physician employees the BHP or BHP employed by same entity as physician
- Physician *must be in the office suite* where the service is being provided and immediately accessible